# **Application Data Sheet**

#### **Application Information**

Application number::

Filing Date::

Application Type::

Regular

Subject Matter:: Utility

Suggested classification::

Suggested Group Art Unit::

CD-ROM or CD-R?::

None

Number of CD disks:: 0

Number of copies of CDs:: 0

Sequence submission?::

Computer Readable Form (CRF)?::

Number of copies of CRF::

Title:: Article and Method for Laser-Etching Stratified

Materials

Attorney Docket Number:: 005127.00302

Request for Early Publication?:: NO

Request for Non-Publication?:: YES

Suggested Drawing Figure::

Total Drawing Sheets:: 10

Small Entity?:: NO

Latin name::
Variety denomination name::

Petition included?:: NO

Petition Type::

Licensed US Govt. Agency::

Contract or Grant Numbers::

Secrecy Order in Parent Appl.?:: NO

# Applicant Information

Applicant Authority Type::	Inventor
Primary Citizenship Country::	•
Status::	Full Capacity
Given Name::	
Middle Name::	,
Family Name::	
Name Suffix::	
City of Residence::	
State or Province of Residence::	* *
Country of Residence::	,
Street of mailing address::	
City of mailing address::	
State or Province of mailing address::	
Country of mailing address::	
Postal or Zip Code of mailing address::	e e e e e e e e e e e e e e e e e e e
Applicant Authority Type::	Inventor
Primary Citizenship Country::	
Status::	Full Capacity
Given Name::	
Middle Name::	
Family Name::	
Name Suffix::	*1
City of Residence::	
State or Province of Residence::	
Country of Residence::	
Street of mailing address::	
City of mailing address::	

State or Province of mailing address::

Country of mailing address::

Postal or Zip Code of mailing address::

**Applicant Authority Type::** 

Inventor

Primary Citizenship Country::

Status::

**Full Capacity** 

Given Name::

Middle Name::

Family Name::

Name Suffix::

City of Residence::

State or Province of Residence::

Country of Residence::

Street of mailing address::

City of mailing address::

State or Province of mailing address::

Country of mailing address::

Postal or Zip Code of mailing address::

#### **Correspondence Information**

Correspondence Customer Number::

22909

## Representative Information

Representative Customer Number::

22909

### **Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
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# Foreign Priority Information

Country::	Application number::	Filing Date::	Priority Claimed::

# **Assignee Information**

Assignee name:: NIKE, Inc.

Street of mailing address:: One Bowerman Drive

City of mailing address:: Beaverton

State or Province of mailing address:: Oregon

Country of mailing address:: U.S.A.

Postal or Zip Code of mailing address:: 97005